

ISDH 2003 Hospital Service Report

(Annual Report under Indiana Code 16-21-6)

Union Hospital, Inc.City: Terre Haute County: Vigo Year: **2003**

Provider Type: General Acute

I. Inpatient Care				
Hospital Service Description	Number of Set Up Beds	Number of Discharges	Number of Patient Days	Average Charge Per Discharge
Burn Care	0	0	0	\$0
Cardiac Intensive	0	0	0	\$0
ICU Med/Surg	32	722	8,052	\$14,219
ICU Neonatal	9	169	1,863	\$14,246
ICU Pediatric	0	0	0	\$0
Medical/Surgical	163	8,709	39,637	\$2,941
Neonatal Intermed	0	0	0	\$0
Obstetrics	27	1,855	4,040	\$1,253
Pediatric	9	409	834	\$1,633

Psychiatric	0	0	0	\$0
Rehabilitation	0	0	0	\$0
Substance Abuse	18	430	5,339	\$7,504
Swing Beds	NA	0	0	\$0
Other Services	0	454	6,305	NA
Acute Subtotal	258	12,748	66,070	NA
Normal Newborn	32	1,230	2,535	\$1,134

II. Outpatient Visits			
Circulatory System	5,440	Digestive System	5,471
Endocrine System	1,774	Injuries and Poison	13,877
Mental Disorder	1,282	Musculoskeletal	11,246
Neoplasms	4,142	Nervous	5,499
Respiratory	6,670	Urinary	6,520
Other/Unknown	35,399	Total Visits	97,320
Number of Visits to Emergency Department			38,866
Percent of Emergency Department Visits of Total Visits			39.9%

Identification of Hospital Services

Each hospital has identified if it has one or more of a standard list of 41 services. This list of services is updated annually by each hospital from the information initially requested by the Centers for Medicare & Medicaid Services when the hospital was initially certified for Medicare payment.

Y - Acute Renal Dialysis	N - Alcohol/Drug Service	Y - Anesthesia Services
Y - Blood Bank	N - Burn Care Unit	N - Chiropractic Service
Y - Coronary Care Unit	Y - Dental Services	Y - Dietetic Services
Y - Emergency Service	Y - Home Care Program	N - Hospice
Y - Inpatient Surgical Services	Y - Intensive Care Unit	Y - Laboratory(Clinical)
Y - Laboratory(Anatomical)	N - Long Term Care Unit	Y - Neonatal Nursery
Y - Nuclear Medicine Services	Y - Obstetrics Services	
Y - Occupational Therapy	Y - Open Heart Surgery	Y - Operating Room
N - Optometric Service	N - Organ Bank	N - Organ Transplant
Y - Outpatient Service	Y - Outpatient Surgery Unit	Y - Pediatric Services
Y - Pharmacy	Y - Physical Therapy	Y - Postoperative Recovery
N - Psychiatric Services	Y - Radiology(Diagnostic)	Y - Radiology(Therapeutic)
Y - Rehabilitation Services	Y - Respiratory Services	N - Self Care Unit
N - Shock Trauma	Y - Social Services	Y - Speech Pathology

NA =	Not applicable	NMF =	No meaningful figure	NR =	Not reported
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